

## 2018 CCO Incentive Measure Benchmarks

18 December 2017

The Metrics & Scoring Committee has selected the measure set, adopted updated benchmarks and improvement targets, and selected challenge pool measures for 2018, reflecting improved CCO performance.

The Metrics & Scoring Committee would like to include a measure of kindergarten readiness in a future CCO incentive measure set. While there is not currently measure, the Committee chose to have the 2018 challenge pool focus on measures with an impact on early childhood health. Challenge pool measures are indicated with an asterisk in the measure column below.

All 2018 improvement targets will be calculated on CY 2017 final performance, and in some cases, 2017 final performance rebased with 2018 specifications.

Measure	2018 Benchmarks	2018 Improvement Targets
Adolescent well care visits	66.0% <i>2017 national Medicaid 75<sup>th</sup> percentile (administrative data only)</i>	Minnesota method with 2 percentage point floor.
Ambulatory care: Emergency department utilization	44.2 visits per 1,000 member months <i>2017 national Medicaid 90<sup>th</sup> percentile</i>	Minnesota method with 2 percent floor.
Assessments for children in DHS custody*	90.0% <i>Committee consensus</i>	Minnesota method with 3 percentage point floor.
CAHPS composite: Access to care	Adults: <b>84.5%</b> ; Children: <b>92.1%</b> <i>2017 national Medicaid 75<sup>th</sup> percentile for (a) adults and (b) children. Must achieve benchmark or improvement target on both for metric credit.</i>	Minnesota method with 2 percentage point floor
Child immunization status* (combo 2)	79.1% <i>2017 national Medicaid 75<sup>th</sup> percentile</i>	Minnesota method with 2 percentage point floor.
Cigarette smoking prevalence	25.0% <i>Committee consensus and alignment with 1115 demonstration waiver goals</i>	Minnesota method with 1 percentage point floor
Colorectal cancer screening	54.0% <i>2016 CCO 90<sup>th</sup> percentile.</i>	Minnesota method with 2 percentage point floor.

<b>Measure</b>	<b>2018 Benchmarks</b>	<b>2018 Improvement Targets</b>
Controlling hypertension	70.6% <i>2016 national Medicaid 90<sup>th</sup> percentile</i>	Minnesota method with 2 percentage point floor.
Dental sealants on permanent molars for children	22.9% <i>2016 CCO 75<sup>th</sup> percentile</i>	Minnesota method with 3 percentage point floor.
Depression screening and follow up	63.0% <i>2016 CCO 90<sup>th</sup> percentile.</i>	Minnesota method with 3 percentage point floor.
Developmental screening*	74.0% <i>2016 CCO 90<sup>th</sup> percentile.</i>	Minnesota method with 3 percentage point floor.
Diabetes: HbA1c poor control	22.6% <i>2016 CCO 90<sup>th</sup> percentile</i>	Minnesota method with 2 percentage point floor.
Disparity measure: Emergency department utilization among members with mental illness	92.9 per 1,000 member months <i>2016 CCO 90<sup>th</sup> percentile</i>	Minnesota method with 3 percent floor.
Effective contraceptive use	50.0% <i>Committee consensus</i>	Minnesota method with 3 percentage point floor.
Patient Centered Primary Care Home enrollment	N/A – sliding scale with 60% threshold	N/A
Timeliness of prenatal care*	91.7% <i>2017 national Medicaid 90<sup>th</sup> percentile</i>	Minnesota method with 3 percentage point floor.
Weight assessment and counseling in children and adolescents	30.4% <i>MIPS 2017 benchmarks - 50<sup>th</sup> percentile</i>	N/A

Version control:

- 18 December 2017: Absolute values of CAHPS benchmarks added (previously TBD).
- 30 October 2017:
  - Corrected benchmark for *Diabetes care: Hba1c poor control*. Previous documentation listed 2016 national Medicaid 90<sup>th</sup> percentile as the benchmark source, with corresponding value of 29.2%. The correct benchmark source as selected by the Metrics and Scoring Committee is the 2016 CCO 90<sup>th</sup> percentile, or 22.6%.
  - Corrected benchmark source for *Controlling hypertension*. Original document erroneously listed 2017 national Medicaid 75<sup>th</sup> percentile. The correct benchmark as selected by the Metrics and Scoring Committee is the 2016 national Medicaid 90<sup>th</sup> percentile.
- 5 October 2017: Updated value for *Disparity measure (ED utilization among members with mental illness)* benchmark to 92.9 visits per 1,000 member months. Earlier documentation erroneously listed the value for the 2016 CCO 75<sup>th</sup> percentile (99.3) rather than the 90<sup>th</sup> percentile (92.9).